



TEXAS BOARD OF PROFESSIONAL LAND SURVEYING

12100 Park 35 Circle, Building A, Suite 156, MC-230
Austin TX 78753

Web: www.txls.state.tx.us

Phone: 512 239 5263 Fax: 512 239 5253

Office Use Only
Transaction #
Entity #

Licensed State Land Surveyor Application

SUPPLEMENTAL ONLINE APPLICATION TO TAKE THE EXAMINATION FOR LICENSURE AS A LICENSED STATE LAND SURVEYOR

INSTRUCTIONS FOR FILING APPLICATIONS

1. General Information

- A. Read all Rules and Regulations of the Board and other enclosures before completing application.
- B. All information requested on this form must be clearly typewritten or lettered in black ink. All questions must be answered; otherwise, Application will be returned to the applicant.
- C. Applications should be prepared in duplicate, the original copy sent to the office of the Board and the duplicate retained by the applicant.
- D. Online payment of \$128.69 must be successfully completed in order for the application to be complete.
- E. This application is for the initial application. Updates must be sent into the Board office along with payment of 150.00.

- 1. First Name _____ Last Name _____ Middle Name _____
- 2. Mailing Address _____
City _____ County _____ State _____ ZIP _____
- 3. Firm Name _____ Firm Number _____
Address: _____
City _____ County _____ State _____ ZIP _____
- 4. Present Position _____

2. Other Registrations

- 1. Registration Number as a Registered Professional Land Surveyor in Texas _____
- 2. Registration Date _____
- 3. License Current To _____
- 4. Has Certificate ever been revoked? _____ If so, specify? _____

3. Photograph

Attach unmounted,
recent, passport type
photograph in the
box below. Trim
photograph to fill the
space.

Use ballpoint pen to
sign and date
photograph.

4. PROFESSIONAL SURVEYING EXPERIENCE

APPLICANT SHOULD FILL OUT ALL COLUMNS

DATE		Title of Position, Name of Employer, Character of Work Performed, Responsibility, and Location of Each Engagement.	Time (Years and Months)			Name and Present Address of Supervisor or Employer (Not Deceased)
From date of Registration as R.P.L.S.	To Present		(1) Total Time (Actual) Yrs. Mos.	(2) From date of Registration as R.P.L.S.	(3) To Present	
TO BE FILLED IN BY APPLICANT - Summary(Actual Time)						

On a separate sheet detail your experience in dealing with the General Land Office and briefly detail your knowledge of the procedure and functions of that office.

5. Certification

I hereby certify under penalty that information contained herein is true and correct to the best of my knowledge, information and belief.

Signed this day the _____ of _____.

Signature

Printed Name